

Teacher:	Mr. Keezer
School:	Leo Hayes High School
Subject:	Psychology
Grade:	12
Date :	14-Dec-10

Unit Goal/Theme/Concept	Summative Assessment
Introducing Psychological Disorders	Quiz, Movie Project

LESSON MAP

Topic: Defining Psychological Disorders	
Class Objective: Review <ul style="list-style-type: none"> • Define psychological disorders • MUDA • Scientific and bio psychosocial models New <ul style="list-style-type: none"> • DSM, un DSM • 	Assessment:
Materials/ Resources: MUDA table, fact or fiction, graphic organizer	
Text/Audio/Video-based Resources YouTube - DSM	Features <i>Bio-Psycho-Social diagram</i>

Instructional Strategies/ Procedure for the Class:

Phase 1: Prior Learning (Circle the Type) - Introduction / Review / Warm-up

Time: 5-10 minutes

- Story time

Phase 2

Review yesterday material

- MUDA
- what does each term mean?
 - Maladaptive - destructive to oneself or others
 - Unjustifiable
 - Disturbing
 - Atypical
- Ancient Civilizations --> 15th century Europe --> 18th century, Philippe Pinel

Medical Model - concept that mental diseases have physical causes that can be diagnosed, treated, and in most cases, cured.

- In 1800s, medical researchers had recently discovered the brain-damaging and mind-altering **syphilis** germ. If the dementia that accompanies syphilis had a physical cause, might it be that *all* mental disorders could be traced to diseases of the body?
- **TODAY**, Contemporary research has uncovered physical causes, both genetic and biochemical, for symptoms of some of the more troubling psychological disorders, including *schizophrenia*, a group of severe disorders characterized by disturbed thinking, perceiving, feeling, and acting.
- often leads to drug therapy
- in its quest to find physiological explanations for mental diseases, the medical model focuses almost **exclusively on nature and almost never on nurture**.
- by failing to consider environment or culture, the medical model **overlooks the influence of such factors as stress, upbringing, and personal history**.

Bio-Psycho-Social Model - contemporary perspective that assumes biological, psychological, and sociocultural factors combine and interact to produce psychological disorders

Biological: evolution, individual, genes, brain structure and chemistry

- includes your genetic *predisposition*, or hereditary susceptibility to a disorder. Genetic predisposition may help explain why some young people endure breakups with a boyfriend or girlfriend without becoming too depressed but others become so sad that they can't go to school. The second group of students may have a greater genetic predisposition to depression than the first group.

Psychological: stress, trauma, learned helplessness, mood-related perceptions and memories

- **DATING EXAMPLE:** First group: explain things in terms of the situation ("I'll really miss being with her [or him], but we're going to be 200 miles apart this summer, and it wouldn't have worked")
- Second group: explains bad events by defining them as examples of permanent faults ("I'm stupid and ugly and I always say the wrong thing; it's all my fault").

Social: roles, expectations, definitions of normality and disorder

- **DATING EXAMPLE:** First group: If person sees breakup as the end of a casual dating arrangement.
- Second group: If the person sees breakup as the end of a long-term and permanent bond, they might react more intensely.

CLASSIFYING DISORDERS

All sciences have a way of organizing, or classifying important information.

- chemistry: periodic table of elements
- biology: animals are hatched or born, cold-blooded or warm-blooded
- Clinical psychologists and psychiatrists classify psychological disorders according to their symptoms to do the following:
 - Describe the disorder
 - predict the future course of the disorder
 - treat the disorder appropriately
 - provide a springboard for research into the disorder's causes

The **American Psychiatric Association** uses the **Diagnostic and Statistical Manual of Mental Disorders (DSM)** as a classification system for psychological disorders **HOW THE DSM WORKS**

- divides mental disorders into **17** major categories
- does not list possible causes
- subject to change and revision
 - **First Edition**: doesn't have *anorexia nervosa* (an eating disorder in which a person becomes significantly underweight but continues to diet)
 - **Third Edition**: dropped homosexuality as a disorder
 - what used to be called "manic-depressive" is now "bipolar disorder"

Five "axes" or "steps"
(show slide)

How accurate is the DSM-IV TR?

What the critics are saying:

- biased because it favors the medical model
- classifies disorders by the symptoms
 - by looking immediately for symptoms, there is an assumption that there is a disorder

START YOUTUBE CLIP - The Diagnostic and Statistical Manual of Mental Disorders (DSM)

The Un-DSM

- organized into 24 strengths into six areas
- **HOMEWORK: VALUES IN ACTION (VIA) SURVEY OF STRENGTHS FOR YOUTH**

Phase 3: Closure – Reflection / Assessment / Review
Time: 5-10mins

Both models are alive and well, but which one makes more "sense"

Enrichment:

Include at least one activity or task that extends the lesson. This can be used for students who have completed the main tasks or if you have completed the lesson and have additional time.

What differences are there between the DSM model and classification and the un-DSM?

What concerns do you have around the DSM

Remediation:

Provide at least one example of how you could simplify the task for students having difficulty.

MUDA

2 models